Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF FLORIDA		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Rolando First name	_	Olga First name Luz
	ilcerise or passport).	Middle name		Middle name
	Bring your picture identification to your	Matos		Matos
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8405		xxx-xx-3320

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Del	otor 2 Olga Luz Matos		Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	170 Cameron Street	If Debtor 2 lives at a different address:		
		Palm Bay, FL 32909 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Brevard			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 Rolando Matos

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	otor 1 otor 2	Rolando Matos Olga Luz Matos					Case number (if known)	
Par	t 2:	Tell the Court About \	our Bank	ruptcy Ca	ase			
7.	Banl	chapter of the				f each, see <i>Notice Required by</i> age 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Ee box.	3ankruptcy
	cnoc	sing to file under	■ Chap	ter 7				
			☐ Chap	ter 11				
			☐ Chap	ter 12				
			☐ Chap	ter 13				
8.	How	you will pay the fee	ab	out how yo	ou may pay. Typica attorney is submit	ally, if you are paying the fee yo	k with the clerk's office in your local court for ourself, you may pay with cash, cashier's che alf, your attorney may pay with a credit card	eck, or money
			□ In	eed to pa	y the fee in instal ee in Installments (Ilments. If you choose this option (Official Form 103A).	on, sign and attach the Application for Individ	duals to Pay
			bu ap	t is not rec plies to yo	quired to, waive your family size and	ur fee, and may do so only if yo you are unable to pay the fee ir	n only if you are filing for Chapter 7. By law, our income is less than 150% of the official po n installments). If you choose this option, you cial Form 103B) and file it with your petition.	overty line that
9.	bank	you filed for cruptcy within the	■ No.					
	iast	8 years?	☐ Yes.	District		\\//la a.a.	Cana ayrahar	
				District District				
				District		When	Case number Case number	
				Diotriot				
10.		any bankruptcy	■ No					
	filed not f you,	s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your lence?	■ No.	Go to	line 12.			
	10010		☐ Yes.	Has yo	our landlord obtain	ned an eviction judgment agains	st you?	
					No. Go to line 12	2.		
					Yes. Fill out <i>Initia</i> this bankruptcy p		Judgment Against You (Form 101A) and file	it as part of

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Debt Debt		Rolando Matos Olga Luz Matos			Case number (if known)	
Part	3:	Report About Any Bu	sinesses	You Own as a Sole Proprie	etor	
	of an	ou a sole proprietor y full- or part-time ness?	■ No.			
	DUSII	1622 (☐ Yes.	Name and location of bu	siness	
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.						
	sole p	have more than one proprietorship, use a ate sheet and attach		Number, Street, City, Sta		
	it to th	nis petition.			ox to describe your business:	
					iness (as defined in 11 U.S.C. § 101(27A))	
				_	al Estate (as defined in 11 U.S.C. § 101(51B))	
					defined in 11 U.S.C. § 101(53A))	
				_ ,	er (as defined in 11 U.S.C. § 101(6))	
				☐ None of the abov	re	
13. Are you filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she bearkruptcy Code and are you a small business are small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, following in 11 U.S.C. 1116(1)(B).					a small business debtor, you must attach your most recent balance sheet, statement of	
	for a	definition of small	■ No.	I am not filing under Cha	pter 11.	
		ess debtor, see 11 C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
			☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Part	4:	Report if You Own or	Have Any	Hazardous Property or Ar	ny Property That Needs Immediate Attention	
14.	-	ou own or have any	■ No.			
	allegories	erty that poses or is ed to pose a threat minent and ifiable hazard to	☐ Yes.	What is the hazard?		
	public health or safety Or do you own any property that needs immediate attention?			If immediate attention is needed, why is it needed?		
				, , ,		
	perisi livest or a b	xample, do you own hable goods, or ock that must be fed, building that needs at repairs?		Where is the property?		
	J. 901				Number, Street, City, State & Zip Code	

	C	Case 6	:19-bk-07158-LVV Doc 1 Fi	led 10)/31	./19 Page 5 of 54
Debto Debto						Case number (if known)
art	Explain Your Efforts	to Receiv	ve a Briefing About Credit Counseling			
Part	r 1 Rolando Matos r 2 Olga Luz Matos	About I You multiple Cee Attached I reconstituted a constitute of Tour reconstitute of		el e er	Abo	G
			Incapacity. I have a mental illness or a mental deficien that makes me incapable of realizing or making rational decisions about finances.	,		☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. ☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
		bri	Active duty. I am currently on active military duty in a military combat zone. You believe you are not required to receive a efing about credit counseling, you must file a otion for waiver credit counseling with the court.			Active duty. I am currently on active military duty in a military combat zone. If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 1 Rolando Matos tor 2 Olga Luz Matos				Case nu	umber (if known)			
Part		ions for R	eporting Purposes						
	What kind of debts do you have?	16a.	Are your debts primarily consu	ımer debts? Consu	umer debts are	e defined in 11 U.S.C. § 10	1(8) as "incurred by an		
	you nave:		individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.		ess debts? Busine	ss debts are d	lebts that vou incurred to ob	otain		
			Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			□ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe the	that are not consum	er debts or bu	siness debts			
17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7?									
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab				dministrative expenses		
	administrative expenses are paid that funds will		■ No						
	be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000		2 5,001-50,00	00		
		□ 50-99		<u> </u>		<u> </u>			
		☐ 100-19 ☐ 200-9		□ 10,001-25,00	0	☐ More than10	0,000		
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	□ \$500,000,00	1 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 millio □ \$50,000,001 - \$100 millio			☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million			☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 -	\$10 million	□ \$500,000,00	1 - \$1 billion		
	estimate your liabilities to be?	_	01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million			001 - \$10 billion 0,001 - \$50 billion		
			001 - \$500,000 001 - \$1 million	□ \$100,000,001		_ ' ' '	,		
Part	7: Sign Below								
For	you	I have ex	amined this petition, and I declare	under penalty of pe	erjury that the i	information provided is true	and correct.		
			chosen to file under Chapter 7, I ar tates Code. I understand the relief						
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341 and 3571.						ne fill out this			
		/s/ Rola	ndo Matos		/s/ Olga Luz				
			o Matos e of Debtor 1		Olga Luz Ma Signature of D				
		Executed	October 31, 2019 MM / DD / YYYY		Executed on	October 31, 2019 MM / DD / YYYY			

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Debtor 1 Debtor 2	Rolando Matos Olga Luz Matos		Case	e number (if known)				
•	attorney, if you are ted by one	under Chapter 7, 11, 12, or 13 of title 11, United	ed States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)				
	e not represented by ey, you do not need s page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	4)(D) applies, certify that I have no knowledge after an inquiry that the information in the					
		/s/ Armando E. Rosal	Date	October 31, 2019				
		Signature of Attorney for Debtor		MM / DD / YYYY				
		Armando E. Rosal						
		Printed name						
		Armando E. Rosal, Esq.						
		Firm name						
		1490 Emerson Drive						
		Palm Bay, FL 32907						
		Number, Street, City, State & ZIP Code						
		Contact phone 321-728-2300	Email address	rosallaw@aol.com				
		929026 FL						
		Bar number & State		<u> </u>				

Fill	in this inform	ation to identify your	case:			
	otor 1	Rolando Matos				
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	Olga Luz Matos First Name	Middle Name	Last Name		
` '		kruptcy Court for the:	MIDDLE DISTRICT OF			
Onn	eu States Dan	kruptcy Court for the.	WIDDLE DISTRICT OF	TEONIDA		
Cas (if kn	e number					ck if this is an
					Q	.acag
Off	ficial For	m 106Sum				
			and Liabilities a	nd Certain Statistical Information		12/15
infor	mation. Fill o	ut all of your schedul	es first; then complete tl	e are filing together, both are equally responsible for he information on this form. If you are filing amend on the box at the top of this page.		
Part	11: Summa	rize Your Assets				
						assets of what you own
1.		B: Property (Official Fe 55, Total real estate, f			\$	220,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B.		\$	1,850.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B		\$	221,850.00
Part	2: Summa	rize Your Liabilities				
					Your	liabilities
					Amou	nt you owe
2.			laims Secured by Property mn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	322,029.00
3.			Unsecured Claims (Official 1) (priority unsecured claim	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured o	claims) from line 6j of Schedule E/F	\$	95,128.00
				Your total liabilities	\$	417,157.00
Pari	3: Summa	rize Your Income and	Expenses			
4.	•	our Income (Official Fo	•			
4.				e I	\$	3,400.00
5.		Your Expenses (Officia onthly expenses from li	,		\$	3,186.00
Part	4: Answer	These Questions for	Administrative and Stat	tistical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. C	P Check this box and submit this form to the court with you	ur other so	chedules.
7.	■ Yes What kind of	f debt do you have?				
				debts are those "incurred by an individual primarily for gray for statistical purposes. 28 U.S.C. § 159.	a persona	l, family, or
		• •		ave nothing to report on this part of the form. Check this	box and	submit this form to

the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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page 1 of 2

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Debtor 1 Debtor 2	Rolando Matos Olga Luz Matos	Case number (if known)		
	n the Statement of Your Current Monthly Income: Cop 1-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Li	• •	orm	\$ 3,900.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	27,585.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	27,585.00

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		Ouse (5.15 BK 6715	O L V	v Doc.	1 11100 10701/10	, rage	10 01 04		
Fill	in this inform	ation to identify	your case and th	is filinç	g:					
Deb	otor 1	Rolando Ma	itos							
		First Name	Middle	Name		Last Name				
	otor 2 use, if filing)	Olga Luz Ma	atos Middle	Nome		Last Name				
(Зро	use, ii iiiiiig)	First Name								
Unit	ted States Ban	kruptcy Court fo	r the: MIDDLE DI	STRIC	T OF FLORID	A				
Cas	se number					_			_	heck if this is an mended filing
Sc In ea	chedule		roperty describe items. List a			an asset fits in more than on e are filing together, both ar			the cate	
		ave any legal or ed				vn or Have an Interest In , land, or similar property?				
1.1				What	t is the property	y? Check all that apply				
•••	1725 NW 91	th Court			Single-family		Do not dec	fuct secured cla	ims or A	xemptions. Put
	Street address, if	available, or other de	scription		Duplex or mul	Iti-unit building or cooperative	the amoun	t of any secure	d claims	on Schedule D: red by Property.
					Manufactured	or mobile home	Cumant ve	oliva af tha	C	mt violero of the
	Homestead	l FL	33030-0000		Land		entire pro	alue of the perty?		nt value of the n you own?
	City	State	ZIP Code		Investment pr	operty	\$1	90,000.00		\$190,000.00
				_	Other has an interest	t in the property? Check one	(such as f	ee simple, ten te), if known.		ership interest the entireties, or
	Miami Dad	_					Joint te	nant		
	Miami-Dad	е			202101 2 01119					
	County			-		,		k if this is com	munity	property
				Otho	, 11 10 dot 0110 0	of the debtors and another ou wish to add about this ite	,	structions)		
					erty identificati		ziii, Suuli dS l(,cai		

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Antor	own or hove more					
Antor	own or have more	than one, list				
	Antorcha #2			is the property? Check all that apply		
	Street address, if available, or other description			Single-family home		claims or exemptions. Put red claims on <i>Schedule D:</i>
				Duplex or multi-unit building Condominium or cooperative		ims Secured by Property.
				Condominant of cooperative		
				Manufactured or mobile home	Current value of the	Current value of the
Agua	s Buenas PR	00703-0000	_ 🛚	Land	entire property?	portion you own?
City	State	ZIP Code		Investment property	\$30,000.00	\$30,000.00
				Timeshare Other		your ownership interest
			_	has an interest in the property? Check one	a life estate), if known.	nancy by the entireties, o
				Debtor 1 only	Joint tenant	
Agua	s Buenas		_ 🗆	Debtor 2 only		
County				Debtor 1 and Debtor 2 only	☐ Check if this is co	mmunity property
				At least one of the debtors and another	(see instructions)	р. оро. су
				r information you wish to add about this it erty identification number:	tem, such as local	
				s home sits empty and was dama	and by Hurriaana Ma	rio Thoy will
				ender property.	aged by Hurricane Ma	na. They will
				your entries from Part 1, including a		\$220,000,00
pages y Part 2: Des o you own omeone els Cars, var No Yes 3.1 Make Mode Year: Appro Other	cribe Your Vehicles n, lease, or have legal se drives. If you lease a ns, trucks, tractors, specials: coximate mileage:	or equitable int vehicle, also report utility vehicle	erest in arcort it on Scles, moto Who has arcord 1 Debtor 1 Debtor 2	ny vehicles, whether they are register contracts and Unicodes. In interest in the property? Check one	Pred or not? Include any value and v	\$220,000.00 wehicles you own that claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own?
pages y Part 2: Des o you own omeone els Cars, var No Yes 3.1 Make Mode Year: Appro Other The	cribe Your Vehicles I, lease, or have legal se drives. If you lease ans, trucks, tractors, spans, trucks, tractors and the control of the co	Part 1. Write the or equitable intervenicle, also report utility vehice	erest in an port it on Steles, moto Who has an Debtor 1 Debtor 2 Debtor 1 At least	ny vehicles, whether they are registered by the contracts and by the contracts are contracts are contracts and by the contracts are contracts are contracts and by the contract are contracted and by the contracted are contracted and contracted are contract	Do not deduct secured the amount of any secu Creditors Who Have Ck	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the

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Debtor 1 Debtor 2			n)
Do you	own or have any le	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		urnishings ces, furniture, linens, china, kitchenware	
■ Ye	s. Describe		
		Living, dining and bedroom furniture. Small appliances. TV, computer and peripherals. Cookware and utensils, small hand tools.	\$450.00
7. Electr Exam ■ No	nples: Televisions ar including cell	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; musi phones, cameras, media players, games	c collections; electronic devices
☐ Ye	s. Describe		
Exan	other collection	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, cons, memorabilia, collectibles	nin, or baseball card collections;
■ No	s. Describe		
	musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe	s and kayaks; carpentry tools;
☐ Ye	s. Describe		
■ No	mples: Pistols, rifles	s, shotguns, ammunition, and related equipment	
	<i>mples:</i> Everyday clo	othes, furs, leather coats, designer wear, shoes, accessories	
■ Ye	s. Describe		
		Men's and women's clothes	\$70.00
■ No	<i>mples:</i> Everyday jev	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems	s, gold, silver
	farm animals mples: Dogs, cats, b	pirds, horses	
	s. Describe		
14. Any ■ No		d household items you did not already list, including any health aids you did not list	
`	s. Give specific info	ormation	
		of all of your entries from Part 3, including any entries for pages you have attached number here	\$520.00

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	ebtor 1	Rolando Mato				
De	ebtor 2	Olga Luz Mato	os		Case number (if known)	
		cribe Your Financia				
Do	you ow	n or have any leç	gal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No [′]	, ,	ve in your wallet, in your ho	•	nd on hand when you file your petiti	on
					Cash	\$30.00
17.	•			ounts; certificates of deposit; with the same institution, lis	shares in credit unions, brokerage l st each.	nouses, and other similar
	Yes			Institution name:		
			17.1. Checking	Wells Fargo		\$1,300.00
18.	Examp No		publicly traded stocks evestment accounts with bro	okerage firms, money marke	t accounts	
19.	Non-pu		ck and interests in incorpo	orated and unincorporated	I businesses, including an interes	t in an LLC, partnership, and
	■ No					
	☐ Yes.	Give specific infor	mation about them Name of entity:		% of ownership:	
20.	Negotia Non-ne	able instruments ir	clude personal checks, cas	tiable and non-negotiable hiers' checks, promissory no nsfer to someone by signing	otes, and money orders.	
	■ No	Civo oposific inform	notion about them			
	Li res. (•	nation about them Issuer name:			
21.	Examp	nent or pension a les: Interests in IR		03(b), thrift savings account	s, or other pension or profit-sharing	plans
	■ No □ Yes. I	ist each account	separately. Type of account:	Institution name:		
22.	Your sh Examp		deposits you have made so	that you may continue serv public utilities (electric, gas,	ice or use from a company water), telecommunications compar	nies, or others
	■ No			la attentia a acasa as is	altrication and	
				Institution name or in		
23.	_	es (A contract for	a periodic payment of mone	ey to you, either for life or for	a number of years)	
	■ No □ Yes	Issu	er name and description.			
24			·	ualified ARI E program as	under a qualified state tuition pro	ogram
∠4.	26 U.S.C		9A(b), and 529(b)(1).	uanneu ABLE program, or	under a quaimeu state tuition pro	ygrani.
	■ No □ Yes	Inst	tution name and description	n. Separately file the records	s of any interests.11 U.S.C. § 521(c)	

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Debtor 1 Debtor 2	Rolando Matos Olga Luz Matos Case number (if known)	
_	equitable or future interests in property (other than anything listed in line 1), and rights or powers exercise	able for your benefit
■ No □ Yes.	Give specific information about them	
Exam	s, copyrights, trademarks, trade secrets, and other intellectual property poles: Internet domain names, websites, proceeds from royalties and licensing agreements	
■ No □ Yes.	Give specific information about them	
	ses, franchises, and other general intangibles ples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
☐ Yes.	Give specific information about them	
Money or	property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax re	funds owed to you	
■ No □ Yes.	Give specific information about them, including whether you already filed the returns and the tax years	
■ No	support bles: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settl Give specific information	lement
Exam	amounts someone owes you bles: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation benefits; unpaid loans you made to someone else Give specific information	on, Social Security
	sts in insurance policies poles: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	Name the insurance company of each policy and list its value. Company name: Beneficiary:	Surrender or refund value:
If you some	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive pone has died.	property because
⊔ Yes.	Give specific information	
	s against third parties, whether or not you have filed a lawsuit or made a demand for payment ples: Accidents, employment disputes, insurance claims, or rights to sue	
☐ Yes.	Describe each claim	
■ No	contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set Describe each claim	off claims
■ No	nancial assets you did not already list Give specific information	

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Debtor Debtor			Case number (if known)	
	dd the dollar value of all of your entries from Part 4, includin r Part 4. Write that number here			\$1,330.00
Part 5:	Describe Any Business-Related Property You Own or Have an Intere	est In. List any real est	ate in Part 1.	
37. Do y	ou own or have any legal or equitable interest in any business-relate	ed property?		
■ No	. Go to Part 6.			
☐ Ye	s. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Intere	st In.	
46. Do	you own or have any legal or equitable interest in any farm-	or commercial fishi	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	you have other property of any kind you did not already list? amples: Season tickets, country club membership	?		
	es. Give specific information			
54. A d	dd the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. P a	art 1: Total real estate, line 2			\$220,000.00
56. P a	art 2: Total vehicles, line 5	\$0.00		
57. P a	art 3: Total personal and household items, line 15	\$520.00		
58. P a	art 4: Total financial assets, line 36	\$1,330.00		
59. P a	art 5: Total business-related property, line 45	\$0.00		
60. P a	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. P a	art 7: Total other property not listed, line 54 +	\$0.00		
62. T o	otal personal property. Add lines 56 through 61	\$1,850.00	Copy personal property total	\$1,850.0
63. T o	otal of all property on Schedule A/B Add line 55 + line 62			\$221 850 00

Fill in this infor	mation to identify your	case:		
Debtor 1	Rolando Matos			
	First Name	Middle Name	Last Name	
Debtor 2	Olga Luz Matos			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number (if known)				☐ Check if this is
				amended filin

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Tantoni value of the Tantoni of the Oxemphon year claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
Living, dining and bedroom furniture. Small appliances. TV, computer and	\$450.00		\$450.00	Fla. Const. art. X, § 4(a)(2)	
peripherals. Cookware and utensils, small hand tools. Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit		
Men's and women's clothes	\$70.00		\$70.00	Fla. Const. art. X, § 4(a)(2)	
Ellie Holli Gonedale A/D.			100% of fair market value, up to any applicable statutory limit		
Cash Line from Schedule A/B: 16.1	\$30.00		\$30.00	Fla. Const. art. X, § 4(a)(2)	
Line Holli Schedule A.B. 16.1			100% of fair market value, up to any applicable statutory limit		
Checking: Wells Fargo Line from Schedule A/B: 17.1	\$1,300.00		\$1,300.00	Fla. Stat. Ann. § 222.16	
Line Irom Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit		

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	otor 1 otor 2	Rolando Matos Olga Luz Matos	Case number (if known)	
3.	(Sub	you claiming a homestead exemption of more than \$170,350? ject to adjustment on 4/01/22 and every 3 years after that for cases filed on or No	r after the date of adjustment.)	
		Yes. Did you acquire the property covered by the exemption within 1,215 day ☐ No	s before you filed this case?	
		□ Vac		

Fill in this info	rmation to identify you	r case.				
Debtor 1		i Case.				
Deptor I	Rolando Matos First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	Olga Luz Matos First Name	Middle Name	Last Name			
United States B	Sankruptcy Court for the:	MIDDLE DISTRICT OF FLOR	IDA			
Case number						
(if known)						if this is an ded filing
Official For	m 106D					
Schedule	D: Creditors	Who Have Claims	Secure	ed by Property	/	12/15
	he Additional Page, fill it o	f two married people are filing togetl out, number the entries, and attach it				
•	, rs have claims secured by	your property?				
☐ No. Che	ck this box and submit th	nis form to the court with your other	r schedules.	You have nothing else to	report on this form.	
Yes. Fill	in all of the information b	pelow.				
Part 1: List	All Secured Claims					
2. List all secure	d claims. If a creditor has n	nore than one secured claim, list the cro	editor separate	Column A	Column B	Column C
for each claim. If much as possible	more than one creditor has , list the claims in alphabetic	a particular claim, list the other creditor cal order according to the creditor's nan	rs in Part 2. As ne.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Nationst	tar/mr Cooper	Describe the property that secures	1	\$322,029.00	\$190,000.00	\$132,029.00
Oreallor 3 Na	THE	1725 NW 9th Court Homesto 33030 Miami-Dade County	ead, FL			
350 High Houston	nland n, TX 77067	As of the date you file, the claim is: apply. Contingent	Check all that			
Number, Stre	eet, City, State & Zip Code	☐ Unliquidated				
Who owed the	debt? Check one.	Disputed				
_	debt? Check one.	Nature of lien. Check all that apply. ☐ An agreement you made (such as	mortgage or s	secured		
■ Debtor 1 only □ Debtor 2 only		car loan)		occurca .		
Debtor 1 and	Debtor 2 only f the debtors and another	☐ Statutory lien (such as tax lien, med ☐ Judgment lien from a lawsuit	echanic's lien)			
	claim relates to a	Other (including a right to offset)	First Mor	tgage		
·	Opened					
Date debt was in		Last 4 digits of account num	7067	<u></u>		
Add the dollar	value of your entries in Co	olumn A on this page. Write that nun	nber here:	\$322,029	9.00	
		the dollar value totals from all pages		\$322,029		
Write that num			_	, , , , , , , , , , , , , , , , , , ,		
		r a Debt That You Already Listed				
trying to collect than one credito	from you for a debt you ov	e notified about your bankruptcy for we to someone else, list the creditor you listed in Part 1, list the addition is page.	in Part 1, and	then list the collection ag	ency here. Similarly, if	you have more
□						
Jonatha	mber, Street, City, State & Z an Meisels, Esq. ongress Ave.	Zip Code		hich line in Part 1 did you en 4 digits of account number _		
Suite 10 Boca R	00 aton, FL 33487					

Official Form 106D

				· ·	_
Fill in this info	rmation to identify your ca	ise:			
Debtor 1	Rolando Matos				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Olga Luz Matos First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case number (if known)					☐ Check if this is an amended filing
Official For	m 106E/F E/F: Creditors Wh	o Have Unsec	ured Claims		12/15
any executory co Schedule G: Exec Schedule D: Cred left. Attach the Co name and case no	ntracts or unexpired leases th cutory Contracts and Unexpire itors Who Have Claims Secur	nat could result in a clain ad Leases (Official Form ed by Property. If more s If you have no informati	n. Also list executory c 106G). Do not include a space is needed, copy t	ontracts on Schedule A/B any creditors with partiall he Part you need, fill it ou	ONPRIORITY claims. List the other party to :: Property (Official Form 106A/B) and on y secured claims that are listed in it, number the entries in the boxes on the e top of any additional pages, write your
	tors have priority unsecured				
No. Go to	• •	o.uo uguo. you .			
☐ Yes.	T all Z.				
□ 165.					
Part 2: List	All of Your NONPRIORITY	Unsecured Claims			
3. Do any credi	tors have nonpriority unsecu	red claims against you?			
☐ No. You h	ave nothing to report in this part	t. Submit this form to the o	ourt with your other sche	edules.	
Yes.					
List all of you unsecured class	aim, list the creditor separately f	or each claim. For each cl	aim listed, identify what t	ype of claim it is. Do not list	ditor has more than one nonpriority claims already included in Part 1. If more disclaims fill out the Continuation Page of
					Total claim
	ced Collection Bu	Last 4 digi	ts of account number	1685	\$465.00
Ро Во	rity Creditor's Name x 560063 edge, FL 32956	When was	the debt incurred?	Opened 06/17	
Number	Street City State Zip Code curred the debt? Check one.	As of the c	ate you file, the claim i	s: Check all that apply	
☐ Debt	or 1 only	☐ Conting	ent		
■ Debt	or 2 only	☐ Unliquid	lated		
☐ Debt	or 1 and Debtor 2 only	☐ Dispute	d		
☐ At lea	ast one of the debtors and anoth	101	NPRIORITY unsecured	l claim:	
	k if this claim is for a commu	_			
debt	aim subject to offset?		ons arising out of a sepa iority claims	ration agreement or divorce	that you did not
Is the ci	ann subject to onset?	<u></u>	•	g plans, and other similar de	ebts
☐ Yes				Attorney Holmes Re	
		J	Cu / Faiiii		

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	1 Rolando Matos 2 Olga Luz Matos	Case number (if known)	
4.2	Allied Interstate	Last 4 digits of account number 8491	\$1,223.00
	Nonpriority Creditor's Name PO Box 361477	When was the debt incurred?	
	Columbus, OH 43236 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	ne of the date year may and training of chook an area appropria	
	☐ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	AMCA	Last 4 digits of account number 6A22	\$339.00
	Nonpriority Creditor's Name PO Box 1235	When was the debt incurred?	
	Elmsford, NY 10523		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	_	
	Debtor 2 only	Contingent	
	_	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	American Express Legal	Last 4 digits of account number 1006	\$4,631.00
	Nonpriority Creditor's Name 500 N. Franklin TPK, Suite 200	When was the debt incurred?	
	Ramsey, NJ 07446		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ 162	Other. Specify	

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	or 2 Olga Luz Matos	Case number (if known)					
4.5	Asset Acceptance LLC Nonpriority Creditor's Name PO Box 2036 Warren, MI 48090	Last 4 digits of account number 5317 When was the debt incurred?	\$1,477.00				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					
4.6	Capital Management Services Nonpriority Creditor's Name	Last 4 digits of account number 3283	\$6,676.00				
	726 Excahange Street Suite 700	When was the debt incurred?					
	Buffalo, NY 14210	- Acceptate to the confined control of the control					
	Number Street City State Zip Code Who incurred the debt? Check one.	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify					
4.7	Capital Management Services	Last 4 digits of account number 8381	\$1,352.00				
	Nonpriority Creditor's Name 726 Excahange Street Suite 700	When was the debt incurred?					
	Buffalo, NY 14210 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	☐ Contingent					
	☐ Debtor 1 only						
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts					
	■ No □ Yes	Debts to pension or profit-snaring plans, and other similar debts Other. Specify					

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Debto Debto	or 1 Rolando Matos Or 2 Olga Luz Matos	Case number (if known)					
4.8	Capital Management Services	Last 4 digits of account number 8899	\$6,516.00				
	Nonpriority Creditor's Name 726 Excahange Street Suite 700	When was the debt incurred?	. ,				
	Buffalo, NY 14210						
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					
4.9	ConServe	Last 4 digits of account number 8503	\$678.00				
	Nonpriority Creditor's Name 200 Croos Keys Office Park Fairport, NY 14450 When was the debt incurred?						
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify					
4.1	Coral Reef Medical Group	Last 4 digits of account number 1117	\$2,559.00				
	Nonpriority Creditor's Name 30334 Old Dixie Highway Homestead, FL 33033	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					

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Debtor Debtor	1 Rolando Matos 2 Olga Luz Matos	Case number (if known)				
4.1	Diversified Consultants, Inc	Last 4 digits of account number	4473	\$832.00		
	Nonpriority Creditor's Name PO Box 551268	When was the debt incurred?				
	Jacksonville, FL 32256 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sens	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	ration agreement of avoice that you did not			
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify For Pinnac	le			
4.1	Enhanced recovery Corp.	Last 4 digits of account number	0001	\$982.00		
	Nonpriority Creditor's Name 8014 Bayberry Rd.	When was the debt incurred?				
	Jacksonville, FL 32256 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only					
	Debtor 2 only					
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	Student loans	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	Yes	Other. Specify				
4.1	Fed Loan Serv	Last 4 digits of account number	0001	\$27,585.00		
	Nonpriority Creditor's Name Pob 60610	When was the debt incurred?	Opened 10/12 Last Active 8/02/19			
	Harrisburg, PA 17106 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	Check if this claim is for a community	Student loans	aration agreement or divorce that you did not			
	debt Is the claim subject to offset?					
	■ No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes ☐ Other. Specify					
		Educationa	•			

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Debtor 2	1 Rolando Matos 2 Olga Luz Matos	Case number (if known)				
	Jackson Health System	Last 4 digits of account number 6735	\$2,765.00			
	Nonpriority Creditor's Name PO Box 864735 Orlando, FL 32886	When was the debt incurred?				
_	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.1	Jackson Health System	Last 4 digits of account number 0753	\$15,559.00			
	Nonpriority Creditor's Name PO Box 864735	When was the debt incurred?				
	Orlando, FL 32886 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.1 6	Jackson South	Last 4 digits of account number 9324	\$851.00			
	Nonpriority Creditor's Name PO Box 864735	When was the debt incurred?				
	Orlando, FL 32886 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical Bill				

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Debtor Debtor	1 Rolando Matos 2 Olga Luz Matos		Case number (if known)		
4.1 7	Kohls/capone	Last 4 digits of account number	2545	\$571.00	
	Nonpriority Creditor's Name		Opened 6/01/16 Last Active		
	Po Box 3115 Milwaukee, WI 53201	When was the debt incurred?	10/25/16		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Charge Acc	count		
4.1	Labcorp	Last 4 digits of account number	7504	\$491.00	
	Nonpriority Creditor's Name PO Box 2240	When was the debt incurred?			
	Burlington, NC 27216 Number Street City State Zip Code Who incurred the debt? Check one.	is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
4.1	Labcorp	Last 4 digits of account number	3839	\$2,597.00	
9	Nonpriority Creditor's Name PO Box 2240	When was the debt incurred?		+=,001100	
	Burlington, NC 27216	_			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community ☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			

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	or 1 Rolando Matos Or 2 Olga Luz Matos	Case number (if known)			
4.2	MCM	Last 4 digits of account number 1290	\$1,091.00		
<u> </u>	Nonpriority Creditor's Name 8875 Aero Drive Suite 200 San Diego, CA 92123	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.2 1	MCM Nonpriority Creditor's Name	Last 4 digits of account number 4801	\$4,167.00		
	Po Box 603 Oaks, PA 19456	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.2	Portfolio Recovery Assoc Nonpriority Creditor's Name	Last 4 digits of account number 2108	\$1,329.00		
	PO Box 12914 Norfolk, VA 23541	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	□ Debts to pension or profit-sharing plans, and other similar debts			
		_			
	☐ Yes	Other. Specify			

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Debto Debto	r 1 Rolando Matos r 2 Olga Luz Matos	Case number (if known)				
4.2		-	40.47.00			
3	Portfolio Recovery Assoc	Last 4 digits of account number 0313	\$817.00			
	Nonpriority Creditor's Name PO Box 12914 Norfolk, VA 23541	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	_	☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	<u> </u>	□ Debts to pension or profit-sharing plans, and other similar debts				
	■ No					
	Yes	Other. Specify				
4.2	Professional Recovery Serv.	Last 4 digits of account number 0389	\$5,171.00			
	Nonpriority Creditor's Name PO Box 1880	When was the debt incurred?				
	Voorhees, NJ 08043 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	The or and you may are drawn to oncore an anal apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	_	Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes					
	□ 165	Other. Specify				
4.2 5	Professional Recovery Serv.	Last 4 digits of account number 2398	\$4,404.00			
	Nonpriority Creditor's Name PO Box 1880	When was the debt incurred?				
	Voorhees, NJ 08043 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	_	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another	Student loans				
	☐ Check if this claim is for a community debt	_				
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	■ No □ Yes					
	⊔ res	Other. Specify				

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Rolando Matos Debtor 2 Olga Luz Matos		Case number (if known)
Name and Address Alliance One Receivables Mgm	On which entry in Part 1 or Part 2 did Line 4.16 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims
4850 Street Rd. Suite 300 Feasterville Trevos, PA 19053		Part 2: Creditors with Nonpriority Unsecured Claims
reastervine rreves, r A 15055	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					<u> </u>
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
		•			
					Total Claim
	6f.	Student loans	6f.	\$	27,585.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	•	•	0.00
	01	you did not report as priority claims	6g.	\$	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	67,543.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	95,128.00
	oj.	- Star Horiphoni, Frida milos on amough of.	υ j.		93,120.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Rolando Matos			
	First Name	Middle Name	Last Name	
Debtor 2	Olga Luz Matos			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number				
(if known)				☐ Check if this is a
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u>—</u>
2.3	,				
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				<u> </u>
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5	,		31010	1000	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	

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Fill in this inf	ormation to identify your	case:			
Debtor 1	Rolando Matos				
5	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Olga Luz Matos First Name	Middle Name	Last Name		
, , ,	Dankeruntau Court for the	MIDDLE DISTRICT OF	EL OBIDA		
United States	Bankruptcy Court for the:	WIDDLE DISTRICT OF	FLORIDA		
Case number					_ 0
(if known)					Check if this is an amended filing
					amended ming
Official F	Form 106H				
Schedu	le H: Your Cod	ebtors			12/15
our name an	d case number (if known) u have any codebtors? (If	. Answer every question			of any Additional Pages, write
1. Do you	Thave any obactions. (iii	you are ming a joint oace,	do not not officer opodoc	as a codestor.	
■ No □ Yes					
2 Within	the last 8 years, have you	lived in a community or	onarty state or territor	v2 (Community proporty	states and territories include
	California, Idaho, Louisiana				states and territories include
= o					
■ No. Go	o to line 3. id your spouse, former spoi	use or legal equivalent live	with you at the time?		
ப 103. D	ia your spouse, former spor	ase, or legal equivalent live	with you at the time:		
3. In Colum	n 1. list all of your codebt	ors. Do not include your	spouse as a codebtor	if your spouse is filing	with you. List the person shown
in line 2 a	again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the	e creditor on Schedule D (Official
Form 106 out Colu	,,	Form 106E/F), or Sched	ule G (Official Form 10	16G). Use Schedule D, S	chedule E/F, or Schedule G to fill
Col	umn 1: Your codebtor			Column 2: The cree	litor to whom you owe the debt
	e, Number, Street, City, State and Z	P Code		Check all schedules	
24				Cobodulo D. lino	
3.1 Nam	ne			_ ☐ Schedule D, line ☐ Schedule E/F, lir	
				☐ Schedule G, line	
Num	nber Street			_	
City		State	ZIP Code		
3.2				☐ Schedule D, line	
Nam	ne			☐ Schedule E/F, lir	
				☐ Schedule G, line	
Num	nber Street			_	
City		State	ZIP Code		

Fill in this informat	tion to identify your case:	
Debtor 1	Rolando Matos	
Debtor 2 (Spouse, if filing)	Olga Luz Matos	
United States Ban	skruptcy Court for the: MIDDLE DISTRICT OF FLORIDA	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Fo	rm 1061	13 income as of the following date:
		MM / DD/ YYYY
Schedule	I: Your Income	12/15
Be as complete a	nd accurate as possible. If two married people are filing together (

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
	employers.	Occupation	Truck Driver	Homemaker
	Include part-time, seasonal, or self-employed work. Employer's name		Schneider National Carriers	
	Occupation may include student or homemaker, if it applies.	Employer's address	Green Bay, WI 54306	
		How long employed the	ere? 5 years	
Par	Give Details About Mon	thly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

spouse unless you are separated.

4. Calculate gross Income. Add line 2 + line 3.

			non-fi	non-filing spouse		
2.	\$	3,910.00	\$	0.00		
3.	+\$_	0.00	+\$	0.00		
4.	\$	3,910.00	\$_	0.00		

Official Form 106l Schedule I: Your Income page 1

Debto Debto		Rolando Matos Olga Luz Matos	-	С	Case number (if ki	nown)				
					For Debtor 1			or Debtor		
	Сор	y line 4 here	4.		\$3,910	0.00	\$		0.00	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 510	0.00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b.			0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		. — — — — — — — — — — — — — — — — — — —	0.00	\$		0.00	-
	5d.	Required repayments of retirement fund loans	5d.		\$	0.00	\$		0.00	-
	5e.	Insurance	5e.		\$	0.00	\$		0.00	-
	5f.	Domestic support obligations	5f.		\$	0.00	\$		0.00	=
	5g.	Union dues	5g.		\$	0.00	\$		0.00	-
	5h.	Other deductions. Specify:	5h.	.+	\$	0.00	+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	;	\$510	0.00	\$_		0.00	_
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$3,400	0.00	\$_		0.00	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.			0.00	. \$_		0.00	_
	8b.	Interest and dividends	8b.		\$	0.00	\$_		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.			0.00	\$_		0.00	-
	8d.	Unemployment compensation	8d.		. —	0.00	\$_		0.00	-
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8e. 8f.			0.00	\$_ \$_		0.00	-
	8g.	Pension or retirement income	8g.		\$	0.00	\$		0.00	_
	8h.	Other monthly income. Specify:	_ 8h.	.+	\$	0.00	+ \$_		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$_		0.00	0
10.		tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	3,400.00	+ \$		0.00	= \$ _	3,400.00
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your r friends or relatives. In include any amounts already included in lines 2-10 or amounts that are not a cify:	depe				·	Schedul	e J. 	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						e. 12.	\$	3,400.00
									Combin	ned
13.	Do y ■	rou expect an increase or decrease within the year after you file this form No.	?							y income

Official Form 106l Schedule I: Your Income page 2

ΞIII	in this informa	ation to identify yo	our case:					
	otor 1	Rolando Mat				Che	eck if this is:	
		Notatido Mai	105				An amended filing	
	otor 2 ouse, if filing)	Olga Luz Ma	tos				A supplement shown 13 expenses as of	wing postpetition chapter the following date:
Unit	ed States Bankı	ruptcy Court for the	: MIDDLI	E DISTRICT OF FLORIDA			MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
Se info	chedule as complete ormation. If m	J: Your	possible eded, atta	. If two married people ar ch another sheet to this				
Par 1.	t 1: Desci	ribe Your House	hold					
1.	☐ No. Go to		in a separ	ate household?				
	■ N	lo	-	al Form 106J-2, <i>Expense</i> s	for Separate House	e <i>hold</i> of Del	btor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.					_	☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	expenses o	penses include f people other t d your depende	han $_{\square}$	No Yes				
exp	imate your ex	a date after the l	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it luded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home owners nd any rent for th		ses for your residence. In	nclude first mortgag	e 4.	\$	1,320.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's	s, or renter	's insurance		4b.	·	0.00
				ipkeep expenses		4c.	·	0.00
F		eowner's associat			mo oquity locas	4d. 5.	·	0.00
5.	Auditional	mortgage paymo	ente for yo	our residence, such as ho	me equity loans	5.	Ψ	0.00

	do Matos .uz Matos	Case num	ber (if known)	
. Utilities:				
6a. Electric	ity, heat, natural gas	6a.	\$	210.00
6b. Water,	sewer, garbage collection	6b.	\$	25.00
6c. Teleph	one, cell phone, Internet, satellite, and cable services	6c.	\$	190.00
6d. Other.	Specify:	6d.	\$	0.00
	usekeeping supplies		\$	300.00
	d children's education costs	8.	\$	0.00
	ndry, and dry cleaning	9.	·	15.00
•	e products and services	10.	\$	20.00
	dental expenses	11.	\$	20.00
	on. Include gas, maintenance, bus or train fare.			20.00
•	e car payments.	12.	\$	25.00
	nt, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ontributions and religious donations	14.		0.00
5. Insurance.			<u> </u>	0.00
	e insurance deducted from your pay or included in lines 4 or 20.			
15a. Life ins		15a.	\$	0.00
15b. Health	nsurance	15b.	\$	436.00
15c. Vehicle	insurance	15c.	\$	70.00
	nsurance. Specify:	15d.	*	0.00
	t include taxes deducted from your pay or included in lines 4 or 20.	_	·	0.00
Specify:	t morado taxos doductos morniyour pay or morados milimos i or 20.	16.	\$	0.00
	r lease payments:		· ———	
	ments for Vehicle 1	17a.	\$	0.00
•	ments for Vehicle 2	17b.	\$	366.00
17c. Other.			\$	0.00
17d. Other.		17d.	•	0.00
	its of alimony, maintenance, and support that you did not report as		<u> </u>	0.00
	m your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	nts you make to support others who do not live with you.		\$	0.00
Specify:	, , , , , , , , , , , , , , , , , , , ,	19.		
· · · —	operty expenses not included in lines 4 or 5 of this form or on School		our Income.	
	ges on other property	20a.		0.00
20b. Real es	tate taxes	20b.	\$	0.00
20c. Proper	y, homeowner's, or renter's insurance	20c.		0.00
	nance, repair, and upkeep expenses	20d.	·	0.00
	wner's association or condominium dues	20e.	·	0.00
Other: Specif		21.		189.00
i. Other. Specii	y: Student Loan Payment		-Ψ	109.00
2. Calculate yo	ur monthly expenses			
22a. Add line	s 4 through 21.		\$	3,186.00
22b. Copy line	e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	<u> </u>
	22a and 22b. The result is your monthly expenses.		\$	3,186.00
	, , ,		· —	
•	ur monthly net income.		_	
. ,	ne 12 (your combined monthly income) from Schedule I.	23a.		3,400.00
23b. Copy y	our monthly expenses from line 22c above.	23b.	-\$	3,186.00
	t your monthly expenses from your monthly income.	00-	œ.	214.00
The res	ult is your monthly net income.	23c.	\$	214.00
For example, d	ct an increase or decrease in your expenses within the year after you by you expect to finish paying for your car loan within the year or do you expect your nhe terms of your mortgage?			or decrease because of
■ No. □ Yes.	Evaloin horo:			
1 1 7 20	Explain here:			

Fill in this infor	mation to identify your	case.			
		ouse.			
Debtor 1	Rolando Matos First Name	Middle Name	Last Name		
Debtor 2	Olga Luz Matos	madio Hame	<u> </u>		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case number					☐ Check if this is an amended filing
Official Forr		ın Individual	Debtor's Sched	dules	12/15
f two married pe	eople are filing together	, both are equally respo	nsible for supplying correct in	formation.	
obtaining money		n connection with a ban	s or amended schedules. Makir kruptcy case can result in fines		
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help you fill out bankru	ptcy forms?	
■ No					
☐ Yes. I	Name of person				Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare te true and correct.	that I have read the sum	nmary and schedules filed with	this declaration and	
X /s/ Rol	ando Matos		X /s/ Olga Luz Mat	tos	
	do Matos		Olga Luz Matos		
Signatu	re of Debtor 1		Signature of Debtor	r 2	
Date _	October 31, 2019		Date October 3	31, 2019	

Fill	in this inforn	nation to identify you	case:							
Deb	otor 1	Rolando Matos								
		First Name	Middle Name	Last Name						
	otor 2 use if, filing)	Olga Luz Matos First Name	Middle Name	Last Name						
Uni	ted States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA						
	se number own)				_	neck if this is an nended filing				
○ f	ficial Ec	rm 107								
	ficial Fo atement		Affairs for Individ	duals Filing for B	ankruptcy	4/19				
info	rmation. If m	ore space is needed,	attach a separate sheet to		equally responsible for supp additional pages, write you					
		n). Answer every ques Details About Your Ma	ະແວກ. rital Status and Where You	Lived Before						
1.		r current marital statu								
	MarriedNot mar	rried								
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?						
	-									
	■ No □ Yes. Lis	at all of the places you li	ved in the last 3 years. Do no	ot include where you live now	<i>'</i> .					
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. state					ity property state or territory co, Texas, Washington and Wi					
	■ No									
	☐ Yes. Ma	ake sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).						
Par	t 2 Explai	n the Sources of You	r Income							
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		dar years?				
	□ No	in the details.								
	- 162. FIII	in the uctalls.								
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$40,900.00	☐ Wages, commissions, bonuses, tips	\$0.00				
			☐ Operating a business		☐ Operating a business					

Official Form 107

Debtor 1 Debtor 2		ando Mat a Luz Mat						Case	number (if known)		
				Debtor 1					Debtor 2		
				Sources	of income that apply.	(befo	ss income ore deductions and usions)	d	Sources of inc		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips \$48,977.00		00	☐ Wages, combonuses, tips	imissions,	\$0.00				
				☐ Opera	ting a business				☐ Operating a	business	
(January 1 to December 31, 2017)			■ Wages bonuses,	s, commissions, tips	ns, \$39,727.00		00	☐ Wages, combonuses, tips	mmissions, \$0.		
		☐ Opera	ting a business				☐ Operating a business				
List €	each so	•	ne gross inco	•		•	eived together, list		•		
				Debtor 1					Debtor 2		
					of income below.	eacl (befo	ss income from h source ore deductions and usions)	d	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3:	List	Certain Pav	ments You	Made Befo	ore You Filed for	Bankru	iptcy				
_	No.	Neither De individual p During the No. Yes * Subject t	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo Go to line 7 List below e	re you filed ach creditor payments t on 4/01/22 r both hav re you filed cach creditor payments t on 4/01/22 r both hav re you filed cach creditor ments for d	amily, or househod for bankruptcy, do not to whom you paned to include payment or an attorney for to an attorney for to an attorney for to an attorney for to whom you paned to whom you paned to support of the support	umer de pld purpo id a tota nts for de chis bankers after tumer de id you p	ebts. Consumer dose." ay any creditor a fall of \$6,825* or moleomestic support of kruptcy case. That for cases filed ebts. ay any creditor a fall of \$600 or more	ore in obligation of total of	of \$6,825* or mo one or more pay tions, such as ch or after the date of of \$600 or more?	re? ments and the support and the support and support	
			attorney ior	ulio Dalikil	ipicy case.						
Cree	ditor's	Name and	Address		Dates of payme	ent	Total amount paid		Amount you still owe	Was this p	payment for

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Debtor 1 Rolando Matos Debtor 2 Olga Luz Matos				Cas	se number (if known)			
7.	Inside of whi	n 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	ertners; relatives of any gene control, or owner of 20% or	eral partners; partner more of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for	
	_	No Yes. List all payments to an insider.						
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment	
insid Inclu		n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a de	ebt that benefited an	
	_	Yes. List all payments to an insider						
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name	
				•				
Par	t 4:	Identify Legal Actions, Repossession	is, and Foreclosures					
List a modi		n 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes.						
	- \	Yes. Fill in the details.						
	Case Case	number	Nature of the case Court or agency			Status of the case		
	Mate	onstar/mr Cooper v. Rolando os 9-CA-26343	Foreclosure	Miami-Dade Co	ounty	■ Pending □ On appe □ Conclude	al	
10.	Check	n 1 year before you filed for bankrupton and that apply and fill in the details below		rty repossessed, f	oreclosed, garnis	hed, attached	I, seized, or levied?	
		Yes. Fill in the information below.						
	Cred	litor Name and Address	Describe the Property		Date		Value of the	
			Explain what happened				property	
11.	accou	n 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details.		uding a bank or fii	nancial institution	, set off any a	mounts from your	
	Cred	litor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount	
2.	court	n 1 year before you filed for bankrupto -appointed receiver, a custodian, or a No Yes		rty in the possess			efit of creditors, a	

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	btor 1 btor 2	Rolando Matos Olga Luz Matos		Case number	(if known)	
Pa	rt 5:	List Certain Gifts and Contribution	าร			
13.		n 2 years before you filed for banki	ruptcy,	did you give any gifts with a total value of more the	nan \$600 per person?	?
	per p	with a total value of more than \$60 person on to Whom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value
14.	Withir			did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Gifts more Char	or contributions to charities that the than \$600 rity's Name Tess (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value
Pa	rt 6:	List Certain Losses				
15.		n 1 year before you filed for bankru mbling?	ıptcy o	r since you filed for bankruptcy, did you lose anyt	hing because of thef	t, fire, other disaster,
	_	No Yes. Fill in the details.				
		cribe the property you lost and the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7:	List Certain Payments or Transfer	s			
16.	consu	ulted about seeking bankruptcy or	prepar	did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	_	No Yes. Fill in the details.				
	Addr Emai	on Who Was Paid ress il or website address on Who Made the Payment, if Not N	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Arma 1490 Palm	ando E. Rosal, Esq. DEmerson Drive n Bay, FL 32907 Illaw@aol.com		Attorney Fees	September 2019	\$1,900.00
17.	promi		ditors	did you or anyone else acting on your behalf pay o or to make payments to your creditors? sted on line 16.	or transfer any prope	rty to anyone who
	_	No Yes. Fill in the details.				
		on Who Was Paid		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

	otor 1 otor 2	Rolando Matos Olga Luz Matos			Case n	umber (if known)		
18.	Includinclud	n 2 years before you filed for bankruptcy ferred in the ordinary course of your bus de both outright transfers and transfers mad de gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa le as security (such as t	i irs? he granting of a s				
	Addı		Description and v property transferr		pay	scribe any property or ments received or debts d in exchange	Date transfer w	as
	Pers	on's relationship to you						
19.	benef	n 10 years before you filed for bankrupto ficiary? (These are often called asset-prote No		y property to a s	self-set	tled trust or similar device o	of which you are	а
	Yes. Fill in the details.							
		e of trust	Description and v	alue of the prop	erty tra	ansferred	Date Transfer v	vas
Por	·4 O.	List of Certain Financial Accounts, Insti	rumanta Safa Danasit	Payer and Sta	rogo II	nito	muuc	
rai	t 8:	List of Certain Financial Accounts, insti	ruments, sale Deposit	boxes, and Sto	nage o	iiis		
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, bro houses, pension funds, cooperatives, associations, and other financial institutions. No								
		Yes. Fill in the details.						
		ress (Number, Street, City, State and ZIP	ast 4 digits of account number	• • • • • • • • • • • • • • • • • • • •		Date account was closed, sold, moved, or transferred	Last bala before closing trans	g oı
21.		ou now have, or did you have within 1 ye , or other valuables?	ar before you filed for	bankruptcy, an	y safe (deposit box or other deposi	itory for securitie	s,
		No						
		Yes. Fill in the details.						
		e of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Descril	be the contents	Do you still have it?	
22.	Have	you stored property in a storage unit or	place other than your	home within 1 y	ear be	fore you filed for bankrupto	cy?	
		No Yes. Fill in the details.						
		ne of Storage Facility ress (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Descril	be the contents	Do you still have it?	
Par	t 9:	Identify Property You Hold or Control fo	or Someone Fise					
	Do yo	ou hold or control any property that som omeone.		ıde any property	y you b	orrowed from, are storing f	or, or hold in tru	st
	_	No Yes. Fill in the details.						
	_	ner's Name ress (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Descril	be the property	Va	alue
Par	t 10:	Give Details About Environmental Infor	,					
		rpose of Part 10, the following definition						

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

Debtor 1 Rolando Matos
Debtor 2 Olga Luz Matos

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site	means any location, facility, or propert wn, operate, or utilize it, including disp	ty as defined under any environmental	law,	whether you now own, operate, o	or utilize it or used			
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort a	II notices, releases, and proceedings th	nat you know about, regardless of wher	n the	y occurred.				
24.	Has	any governmental unit notified you tha	at you may be liable or potentially liable	und	ler or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.								
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
25.	Hav	e you notified any governmental unit of	f any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice			
26.	Hav	e you been a party in any judicial or adı	,	ironn	nental law? Include settlements a	and orders.			
	■ No								
		Yes. Fill in the details.							
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case			
Pai	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Wit	nin 4 years before you filed for bankrup	otcy, did you own a business or have an	ny of	the following connections to any	/ business?			
			in a trade, profession, or other activity,	-	-				
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)								
	□ A partner in a partnership								
		☐ An officer, director, or managing ex	xecutive of a corporation						
		☐ An owner of at least 5% of the votin	ng or equity securities of a corporation						
	No. None of the above applies. Go to Part 12.								
		Yes. Check all that apply above and fil	II in the details below for each business	s.					
		siness Name	Describe the nature of the business		Employer Identification number				
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security Dates business existed	number or ITIN.			
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	tcy, did you give a financial statement (to an	yone about your business? Inclu	ude all financial			
		No Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)								
		,							

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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Debtor 1	Rolando Matos	S	
Debtor 2	Olga Luz Mato	s	Case number (if known)
with a bar		result in fines up to \$250,000, or im	nt, concealing property, or obtaining money or property by fraud in connection nprisonment for up to 20 years, or both.
/s/ Rolai	ndo Matos	/s/ O	Diga Luz Matos
Rolando	Matos	Olga	a Luz Matos
Signature	e of Debtor 1	Signa	ature of Debtor 2
Date O	ctober 31, 2019	Date	October 31, 2019
Did you at	ttach additional pa	ges to Your Statement of Financial	I Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No			
□Yes			
Did you p	ay or agree to pay	someone who is not an attorney to	help you fill out bankruptcy forms?
No			
⊐ Yes. Na	ame of Person	. Attach the Bankruptcv Petition Pre	reparer's Notice. Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your o	case:		I
Debtor 1	Rolando Matos			
	First Name	Middle Name	Last Name	
Debtor 2	Olga Luz Matos First Name	A4: 1 11 A1		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRIC	CT OF FLORIDA	
Case number				
(if known)				☐ Check if this is an amended filing
If you are an ind	nt of Intentio	oter 7, you must fi	viduals Filing Under Chap	ter 7 12/15
you have least	ever is earlier, unless th	nd the lease has r ithin 30 days after	not expired. r you file your bankruptcy petition or by the date ne time for cause. You must also send copies to	
•	eople are filing together	in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
	and accurate as possib our name and case nun		s needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims		
1. For any credit		ert 1 of Schedule I	D: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
	editor and the property th	nat is collateral	What do you intend to do with the property th secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	lationstar/mr Cooper		■ Surrender the property.	■ No
name:	•		Retain the property and redeem it.	_ 110
			☐ Retain the property and enter into a	☐ Yes
Description of	1725 NW 9th Court FL 33030 Miami-Da		Reaffirmation Agreement.	
property securing debt		ade County	☐ Retain the property and [explain]:	
Part 2: List Y	our Unexpired Personal	Property Leases		
For any unexpire in the information	ed personal property lea on below. Do not list rea	ase that you listed I estate leases. Ur	I in Schedule G: Executory Contracts and Unexp nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p	the lease period has not yet ended.
Describe your	unexpired personal prop	erty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of le Property:	ased			□ Yes
Lessor's name:				□ No
Description of le Property:	ased			☐ Yes
Lessor's name:				
Official Form 108		Statement of I	ntention for Individuals Filing Under Chapter 7	page ?

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	otor 1 otor 2	Rolando Matos Olga Luz Matos	Case number (if known)
	scription perty:	n of leased	□ No
Des	ssor's na scription perty:	ame: n of leased	□ No
Des	ssor's na scription perty:	ame: n of leased	□ No □ Yes
Des	ssor's na scription perty:	ame: n of leased	□ No □ Yes
Des	perty:	n of leased	□ No □ Yes
Und pro	ler pen	nat is subject to an unexpired lease.	my intention about any property of my estate that secures a debt and any personal
X	Rola	olando Matos ndo Matos ature of Debtor 1	X /s/ Olga Luz Matos Olga Luz Matos Signature of Debtor 2
	Date	October 31, 2019	Date October 31, 2019

Fill in this info	rmation to identify your case:						rected in	this form and in F	orm
Debtor 1	Rolando Matos			122	A-1S	upp:			
Debtor 2 (Spouse, if filing)	Olga Luz Matos			•	■ 1. 7	here is no pres	umption o	of abuse	
United States	Bankruptcy Court for the: Middle District	of Florida					ade und	ine if a presumption er <i>Chapter 7 Mea</i> 1224-2)	
Case number				_] 3. 7	he Means Test	does not	apply now becau but it could apply	
						eck if this is a			idioi.
Official F	orm 122A - 1			•	_ 0.	iook ii ti iio io a	i amond	aca ming	
	7 Statement of Your C	urrent	Mor	thly Inc	٥m	Δ			10/19
Chapter	7 Statement of Tour C	uncii	IVIOI	itiliy ilic		<u> </u>			10/13
attach a separa case number (if qualifying milita	and accurate as possible. If two married peote sheet to this form. Include the line number known). If you believe that you are exempted any service, complete and file Statement of Exalculate Your Current Monthly Income	to which the a	ddition	al information a of abuse because	pplies se you	. On the top of aid do not have pring	y addition narily con	nal pages, write yo sumer debts or be	ur name and cause of
1. What is	your marital and filing status? Check on	e only.							
☐ Not n	narried. Fill out Column A, lines 2-11.								
■ Marri	ed and your spouse is filing with you. F	ill out both Co	lumns	A and B, lines	2-11.				
	ed and your spouse is NOT filing with y								
	ing in the same household and are not		•	•	umns	A and B. lines 2	P-11.		
	ing separately or are legally separated.							this hay you de	clare under
pe	nalty of perjury that you and your spouse a ing apart for reasons that do not include ev	re legally sep	arated	under nonbank	krupto	y law that applie	es or that		
101(10A). Fo the 6 months	rerage monthly income that you received from or example, if you are filing on September 15, the is, add the income for all 6 months and divide the in the same rental property, put the income from the	6-month period total by 6. Fill in	d would n the res	be March 1 throu sult. Do not includ	gh Au e any	gust 31. If the amoincome amount m	unt of you ore than or	r monthly income va nce. For example, if	ried during both
					Colui Debt		Column Debtor non-fili		
_	oss wages, salary, tips, bonuses, overtine ductions).	ne, and com	missio	ons (before all	\$	3,900.00	\$	0.00	
	and maintenance payments. Do not incl B is filled in.	ude payment	s from	a spouse if	\$	0.00	\$	0.00	
of you o from an u and roon	unts from any source which are regularl r your dependents, including child supp unmarried partner, members of your house nmates. Include regular contributions from Do not include payments you listed on line	port. Include in the hold, your de a spouse only	egular pender	contributions nts, parents, umn B is not	\$	0.00	\$	0.00	
	me from operating a business, professi				–		Ť		
J. 1101 11100		, -	Deb	tor 1					
Gross re	ceipts (before all deductions)	\$	0.00						
	and necessary operating expenses		0.00						
Net mon	thly income from a business, profession, or	farm \$	0.00	Copy here ->	\$	0.00	\$	0.00	
6. Net inco	me from rental and other real property		_		_	_			
			Deb	tor 1					
Gross re	ceipts (before all deductions)	\$	0.00						

Official Form 122A-1

0.00

0.00 Copy here -> \$

\$

0.00

0.00

\$

\$

0.00

0.00

\$ -\$

\$

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Deptor 1	a Luz Matos a Luz Matos			Case number	er (if known)			
				Column A Debtor 1		Column B Debtor 2 non-filing	or	
8. Unemploy	yment compensation			\$	0.00	\$	0.00	
Do not ent the Social	ter the amount if you contend that the amou Security Act. Instead, list it here:	nt received was a bene	efit under					
For you		\$.00					
	r spouse		.00					
benefit und not include United Sta disability, o pay paid u does not e	or retirement income. Do not include any a der the Social Security Act. Also, except as e any compensation, pension, pay, annuity, ates Government in connection with a disabi or death of a member of the uniformed serv ander chapter 61 of title 10, then include that exceed the amount of retired pay to which you ander any provision of title 10 other than cha	stated in the next sent- or allowance paid by the lity, combat-related inju- ices. If you received are to pay only to the extent- ou would otherwise be	ence, do ne ury or ny retired that it	\$	0.00	\$	0.00	
Do not included received a domestic to United State disability, of the control of	om all other sources not listed above. Splude any benefits received under the Social is a victim of a war crime, a crime against hierrorism; or compensation, pension, pay, and the Government in connection with a disable or death of a member of the uniformed serving a separate page and put the total below.	Security Act; payment umanity, or international unuity, or allowance pality, combat-related injuices. If necessary, list of the combat in the	s al or iid by the ury or	\$	0.00	\$	0.00	
_				\$	0.00	\$	0.00	
T	otal amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
each colur Part 2: Det	your total current monthly income. Add mn. Then add the total for Column A to the termine Whether the Means Test Applies	to You	\$	3,900.00	+ \$	0.00		3,900.00 urrent monthly
	your current monthly income for the year	·						
12a. Copy	your total current monthly income from line	11		Сор	y line 11 h	nere=>	\$	3,900.00
Multip	ply by 12 (the number of months in a year)						x 1	
12b. The r	result is your annual income for this part of t	he form				12	b. \$ 4	6,800.00
13. Calculate	the median family income that applies to	you. Follow these ste	eps:					
Fill in the s	state in which you live.	FL						
Fill in the r	number of people in your household.	2						
To find a li	median family income for your state and siz- ist of applicable median income amounts, g m. This list may also be available at the bar	o online using the link	specified i	in the separ	ate instruc	13 tions	s. [\$ <u>6</u>	0,400.00
14. How do th	ne lines compare?							
14a.	Line 12b is less than or equal to line 13.	On the top of page 1, c	heck box	1, There is	no presum	ption of abu	ise.	
14b. 🗖		of page 1, check box 2	2, The pre	esumption o	f abuse is	determined	by Form 12	2A-2.
Part 3: Sig	ın Below							
By sig	gning here, I declare under penalty of perjui	ry that the information of	on this sta	tement and	in any atta	achments is	true and co	rrect.
X /s/	Rolando Matos	¥	/s/ Olga	Luz Mato	s			
Ro	olando Matos		Olga Lu	z Matos				
Sig	gnature of Debtor 1		Signature	e of Debtor 2	2			

Rolando Matos

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Debtor 1 Debtor 2	Rolando Matos Olga Luz Matos		Case number (if known)	
D	October 31, 2019 MM / DD / YYYY	Date	October 31, 2019 MM / DD / YYYY	
If you checked line 14a, do NOT fill out or file Form 122A-2.				
	If you checked line 14b, fill out Form 122A-2 and file it with this	form.		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation
	\$245	filing fee
	\$75	administrative fee
	+ \$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

	Rolando Matos								
In re	Olga Luz Matos		Case No						
		Debtor(s)	Chapter 7						
VERIFICATION OF CREDITOR MATRIX The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.									
Date:	October 31, 2019	/s/ Rolando Matos Rolando Matos Signature of Debtor							
Date:	October 31, 2019	/s/ Olga Luz Matos							
		Olga Luz Matos							

Signature of Debtor

Rolando Matos 170 Cameron Street Palm Bay, FL 32909 Capital Management Services 726 Excahange Street Suite 700 Buffalo, NY 14210 Kohls/capone Po Box 3115 Milwaukee, WI 53201

Olga Luz Matos 170 Cameron Street Palm Bay, FL 32909

ConServe 200 Croos Keys Office Park Fairport, NY 14450 Labcorp PO Box 2240 Burlington, NC 27216

Armando E. Rosal Armando E. Rosal, Esq. 1490 Emerson Drive Palm Bay, FL 32907 Coral Reef Medical Group 30334 Old Dixie Highway Homestead, FL 33033

MCM 8875 Aero Drive Suite 200 San Diego, CA 92123

Advanced Collection Bu Po Box 560063 Rockledge, FL 32956 Diversified Consultants, Inc PO Box 551268 Jacksonville, FL 32256 MCM Po Box 603 Oaks, PA 19456

Alliance One Receivables Mgm 4850 Street Rd. Suite 300 Feasterville Trevos, PA 19053 Enhanced recovery Corp. 8014 Bayberry Rd. Jacksonville, FL 32256 Nationstar/mr Cooper 350 Highland Houston, TX 77067

Allied Interstate PO Box 361477 Columbus, OH 43236 Fed Loan Serv Pob 60610 Harrisburg, PA 17106 Portfolio Recovery Assoc PO Box 12914 Norfolk, VA 23541

AMCA PO Box 1235 Elmsford, NY 10523 Jackson Health System PO Box 864735 Orlando, FL 32886 Professional Recovery Serv. PO Box 1880 Voorhees, NJ 08043

American Express Legal 500 N. Franklin TPK, Suite 200 Ramsey, NJ 07446 Jackson South PO Box 864735 Orlando, FL 32886

Asset Acceptance LLC PO Box 2036 Warren, MI 48090 Jonathan Meisels, Esq. 6409 Congress Ave. Suite 100 Boca Raton, FL 33487 B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In re	Rolando Matos Olga Luz Matos		Case No).	
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy of or in connection with the bar	or agreed to be pa kruptcy case is as	id to me, for services rene	dered or to
	For legal services, I have agreed to accept			1,900.00	
	Prior to the filing of this statement I have received		\$	1,900.00	
	Balance Due		\$	0.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. l	I have not agreed to share the above-disclosed compo	ensation with any other person	unless they are me	embers and associates of r	ny law firm.
İ	☐ I have agreed to share the above-disclosed compensations of the agreement, together with a list of the name				v firm. A
5. 1	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspect	s of the bankruptc	y case, including:	
t c	Analysis of the debtor's financial situation, and rendePreparation and filing of any petition, schedules, stateRepresentation of the debtor at the meeting of credito[Other provisions as needed]	ement of affairs and plan which	may be required;	-	ıptcy;
	Negotiations with secured creditors to re reaffirmation agreements and application		emption plannir	g; preparation and fil	ing of
б. І	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding, prepara of liens on household goods. Redemption meeting in Orlando.	chargeability actions, judi ation and filing of motions	cial lien avoida pursuant to 11	USC 522(f)(2)(A) for a	voidance
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for	r representation of the del	otor(s) in
0	ctober 31, 2019	/s/ Armando E. R			
Date		Armando E. Rosa Signature of Attorna			
		Armando E. Rosa	al, Esq.		
		1490 Emerson Di Palm Bay, FL 329			
		321-728-2300 Fa	x: 321-728-2442		
		rosallaw@aol.co Name of law firm	m		
		ivame oj iaw jiim			